

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>mg</i>	<i>12</i>	<i>11/8/00</i>
O.I.P.E. CLASSIFIER			<i>2/3</i>
FORMALITY REVIEW	<i>W. H. H.</i>	<i>71139</i>	<i>5-8-00</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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